POSITION	INITIALS	ID NO.	DATE					
FEE DETERMINATION	Mi	75331	<del></del>					
O.I.P.E. CLASSIFIER	U	1000	2/15					
FORMALITY REVIEW		111153	2/19/10					
RESPONSE FORMALITY REVIEW								

## **INDEX OF CLAIMS**

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	Allowed	Ι	Interference
_	(Through numeral) Canceled	Α	Appea!
	Restricted	0	Objected

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If more than 150 claims or 10 actions staple additional sheet here